

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/582962

FILING DATE

10 FEB 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/			/		
2	/			/		
3		2		/		
4		2		/		
5		2	1	/		
6		1		/		
7		1		/		
8		2		/		
9		2		/		
10		1	1	/		
11		1		1		
12		1		1		
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TOTAL IND.	2	↓	2	↓		↓
TOTAL DEP.	15	←	2	←		←
TOTAL CLAIMS	17		4			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						